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PTO/SB/05 (11-00)
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## UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docket No. First Inventor

a. Computer Readable Form (CRF)  Lescriptive tile of the invention  - Cross Reference to Related Applications  - Statement Regarding Fed sponsored R & D  - Reference to sequence listing, a table, or a computer program listing appendix  - Background of the Invention  - Brief Description of the Drawings (if filed)  - Detailed Description  - Claim(s)  - Detailed Description  - Claim(s)  - Abstract of the Disclosure  4.  Drawing(s) (35 U.S.C. 113)  [ Total Sheets	(Only for new nonprovision	nal applications under 37 CFR 1.53(b))	Express Mail Label No. ヒトメンコルシー	
The Transmittal Form (e.g., PTOSBIT)   The transmittal	APPLICA	ATION ELEMENTS	LADDDEOO TO	
Computer Program (Appendix)	See MPEP chapter 600 con	cerning utility patent application content	ts. Washington, DC 20231	
Applicant claims small entity status.  Sepacification  Total Pages  3   Specification  Specification  Cross Reference to Related Applications  - Statement Regarding Fed sponsored R & D  - Reference to Sequence Sisting at able, or a computer program listing appendix  - Background of the Invention  Brief Summary of the Invention of the Drawings (I filed)  Brief Summary of the Invention of the Drawings (I filed)  Brief Summary of the Invention Discourse (Invention Statement Invention Statement Invention Statement Invention Invention Statement Invention Invention Statement Invention Invent				
3. Specification 3. Specification 4. Computer Readable Form (CRF) 5. Descriptive title of the invention 6. Cross Reference to Related Applications 7. Statement Regarding Fed sponsored R & D 8. Reference to Related Applications 8. Statement Regarding Fed sponsored R & D 8. Reference to Related Applications 9. Reference to Related Applications 9. Reference to Related Application 1. Labely or a computer program issting appendix 1. Background of the Invention 1. Brief Summary of the Invention Summary of the Invention Discourse of the Statement (IDS) PTO-1449 1. Brief Summary of Statement (IDS) PTO-1449 1. Brief Summary of Statement (IDS) PTO-1449 1. Brief Summary Amendment 1. Brief Summary Amendmen	Applicant claims	small entity status.	8. Nucleotide and/or Amino Acid Sequence Submission	
Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Claim(s) - Abstract of the Disclosure  4. Drawing(s) (35 U.S.C. 113) [ Total Sheets	Specification	[Total Pages   35   ]	,	
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- Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure  4.  \[ \times \] Drawing(s) (35 U.S.C. 113)  \[ Total Sheets \] 1 5. Oath or Declaration  \[ Total Pages \] 1 a.  \[ \times \] Newly executed (original or copy) b.  \[ \times \] Copy from a prior application (37 CFR 1.63 (d)) b.  \[ \times \] Copy from a prior application (37 CFR 1.63 (d)) b.  \[ \times \] PELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.53(y2) and 1.33(b). 6.  \[ \times \] Application Data Sheet. See 37 CFR 1.76  18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:  18. If a CONTINUING ORD DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box Sb, is considered a part of the disclosure of the accompanying continuation or divisional application parts.  19. CORRESPONDENCE ADDRESS    Questioner Number or Bar Code Label   Symmetric States   State   V			c. Statements verifying identity of above copies	
- Detailed Description - Claim(s) - Claim(s) - Abstract of the Disclosure  4.			ACCOMPANYING APPLICATION PARTS	
- Abstract of the Disclosure  4.  \[ \int \] Drawing(s) (35 U.S.C. 113)  \[ Total Sheets \] \[ 2 \] \]  5. Oath or Declaration  \[ Total Pages \] \[ 1 \]  a.  \[ \] Newly executed (original or copy)  \[ 12 \]  b.  \[ \] Copy from a prior application (37 CFR 1.63 (d))  \[ \] b.  \[ \] (for continuation/distributional with Box 18 completed)  \[ \] i.  \[ \] DELETION OF INVENTOR(S)  \[ \] Signed statement (10S)/PTO-1449  \[ \] Clations  \[ \] Signed statement (10S)/PTO-1449  \[ \] Copies of IDS statement (10S)/PTO-1449  \[ \] Clations  \[ \] Preliminary Amendment  \[ \] (for continuation/distributional with Box 18 completed)  \[ \] i.  \[ \] DELETION OF INVENTOR(S)  \[ \] Signed statement attached detelling inventor(s)  \[ \] named in the prior application, see 37 CFR  \[ \] 1.5(3)(2) and 1.3(b).  \[ \] (Certified Copy of Priority Document(s)  \[ \] (if foreign priority is claimed)  \[ \] (if priority priority is claimed)  \[ \] (if priority priority prio	- Detailed Descr		9. Assignment Papers (cover sheet & document(s))	
4.		Disclosure	140	
5. Oath or Declaration  a. Newly executed (original or copy) a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63 (d)) f. Copy from a prior application (37 CFR 1.63 (d)) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:    Continuation   Divisional   Continuation-in-part (CIP)   Of prior application No.	4 X Drawing(s) (35.1	LS C 113) [Total Sheets 2	(man acceptable)	
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i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).  6. Application Data Sheet. See 37 CFR 1.76  18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:    Continuation   Divisional   Continuation-in-part (CIP)   Of prior application No:   Prior application Mornation:   Examiner   Group Art Unit:     For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 55, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.  19. CORRESPONDENCE ADDRESS    Customer Number or Bar Code Label   Fisied Customer No. or Attach 50x code lated hard   Single Customer No. or Attach 50x code lated hard   Single Customer No. or Attach 50x code lated hard   Single Customer No. or Attach 50x code lated   Nord	Copy from a	a prior application (37 CFR 1.63 (d))		
16.   Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.			Certified Copy of Priority Document(s)	
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Address  Application Data Sheet. See 37 CFR 1.76  17. Other:  18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional Continuation:  Examiner Group Art Unit:  For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.  19. CORRESPONDENCE ADDRESS  Customer Number or Bar Code Label (insed Customer No. of Atlanh bur code label fiber)  Name  Ryan K. Simmons Esq.  Address  City State VT Zip Code 05495  Country State VT Zip Code 05495  Fax \$2-87-9468  Name (Print/Type) Ryan K. Simmons Registration No. (Attorney/Agent) 45 848	1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/3			
or in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional Continuation-in-part (CIP) of prior application No.:  Prior application information: Examiner Group Art Unit:  For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.  19. CORRESPONDENCE ADDRESS  Customer Number or Bar Code Label  (insed Customer No. or Attach bar sode label here)  Name  Ryan K. Simmons Esq.  Address  City State VT Zip Code 05495  Country  Name (Print/Type)  Ryan K. Simmons Registration No. (Attorney/Agent)  Name (Print/Type)  Ryan K. Simmons Registration No. (Attorney/Agent)  V 5 348	6. Application Data	Sheet. See 37 CFR 1.76		
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19. CORRESPONDENCE ADDRESS  Customer Number or Bar Code Label  Ryan K. Simmons Esq.  Address  400 Corner of tone Orive Swife 325  City  Willisten  State  VT Zip Code 05495  Country  Name (Print/Type)  Ryan K. Simmons  State  VT Zip Code 05495  Registration No. (Attorney/Agent) 45 848	Box 5b, is considered a part o	of the disclosure of the accompanying con	tinuation or divisional application and is hereby incorporated by reference.	
Name  Ryan K. Simmons Esq.  ip Capital Group Inc.  Address  City  Willisten  State  VT  Zip Code 05495  Country  Name (Print/Type)  Ryan K. Simmons  Registration No. (Attorney/Agent)  45 848				
Address 400 Corner stone Orive Swite 325  City Willisten State VT Zip Code 05495  Country USA Telephone 802-872-3200 Fax 82-872-9468  Name (Print/Type) Ryan K. Simmers Registration No. (Attorney/Agent) 45 848	Customer Number or Bar C	code Label (Insert Customer No. or Attac		
Address 400 Corner otone Drive Suite 325  City Willisten State VT Zip Code 05495  Country USA Telephone 802-872-3200 Fax 82-872-9468  Name (Print/Type) Ryan K. Simmers Registration No. (Attorney/Agent) 45 848	Name	Rvan K. Simm	ons Esq.	
Address 400 Corneratore Drive Swite 325  City Willisten State VT Zip Code 05495  Country USA Telephone 802-872-3200 Fax 82-872-9468  Name (Print/Type) Ryan K. Simmers Registration No. (Attorney/Agent) 45 848			~ _/ ~ ~	
Country  USA  Telephone 802-872-3200 Fax 82-872-9468  Name (Print/Type)  Ryun K. Simmers Registration No. (Attorney/Agent) 45 848	Address	400 Corneratore	Orive Suite 325	
Name (Print/Type) Ryan K. Simmers Registration No. (Attorney/Agent) 45 848	City	Williston	State VT Zip Code 05495	
	Country	USA 1	Telephone 802-872-3200 Fax 82-872-946	
	Name (Print/Type)	Ryan K. Simmera	Registration No. (Attorney/Agent) 45 848	
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## FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** 

(\$)	959.	0/10
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Complete if Known				
Application Number				
Filing Date	1/14/01			
First Named Inventor	John E. Cranin			
Examiner Name				
Group Art Unit				
Attorney Docket No.	1066-006			

METHOD OF PAYMENT	FEE CALCULATION (continued)				
1. The Commissioner is hereby authorized to charge indicated fees and credit any overnayments to:	3. ADDITIONAL FEES				
indicated fees and credit any overpayments to:  Deposit	Large Small				
Account Number	Entity Entity Fee	Foe Boid			
Deposit	Fee Fee Fee Fee Fee Description   Code (\$)   Code (\$)	Fee Paid			
Account Name	105 130 205 65 Surcharge - late filing fee or oath				
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
Applicant claims small entity status	139 130 139 130 Non-English specification				
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination				
2. Payment Enclosed: Chedc # 2852	112 920* 112 920* Requesting publication of SIR prior to				
Check Credit card Money Other	Examiner action				
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action				
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month				
Large Entity Small Entity	116 390 216 195 Extension for reply within second month				
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 890 217 445 Extension for reply within third month				
404 740 204 255 1856 565	118 1,390 218 695 Extension for reply within fourth month				
106 320 206 160 Design filing fee	128 1,890 228 945 Extension for reply within fifth month				
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal				
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal				
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing				
	138 1,510 138 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 335 3.00	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES Fee from	141 1,240 241 620 Petition to revive - unintentional				
Extra Claims below Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)				
Total Claims	143 440 243 220 Design issue fee				
Claims VO - 3 - V ^ = 4200	144 600 244 300 Plant issue fee				
Multiple Dependent =	122 130 122 130 Petitions to the Commissioner				
	123 50 123 50 Processing fee under 37 CFR 1.17(q)				
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt				
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)				
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection				
104 270 204 135 Multiple dependent claim, if not paid	(37 CFR § 1.129(a))				
109 80 209 40 ** Reissue independent claims over original patent	149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)				
and over original patent	169 900 169 900 Request for expedited examination				
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**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)	ე. <i>ი</i> ი			

SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Ryungk. Simugers	Registration No. (Attorney/Agent)	45848	Telephone	802-872-3200
Signature	Musan !			Date	1/18/01

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